FEC FORM 1

2016 - 02 - 18 - 08 - 00051-159

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2016 FEB dm 6 4 4 4 12

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
LULETT STONES	Description of the	. D. C. of Cat. Adv			
WEILLSTONE .	UPMO CRATIT		LIVB PAIC		
ADDRESS (number and street)	2181 BRAG	MAR RID			
(Check if address is changed)					
,	CITY A		C A 7 4 6 0 2 - <t< td=""></t<>		
COMMITTEE'S E-MAIL ADDRE	SS				
(Check if address is changed)	(filioigidihiaiein	uola K landagim			
	Optional Second E-Mail Ad	ddress			
	Kicicia la villa	Parcilo edu			
			. :		
COMMITTEE'S WEB PAGE AD	DRESS (URL)				
(Check if address is changed)	ωιωιωι. ιωιε : (1 1 1 5	stipikieiciliubi 20	ı rıgı 		
	Lilia	 			
2. DATE 01 28 2016					
3. FEC IDENTIFICATION NUMBER ▶ \[C\oldsymbol{\oldsymbol{O}}\oldsymbol{\oldsymbol}\oldsymbol{\oldsymbol{O}}\oldsymbol{\oldsymbol{O}}\ol					
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined t	his Statement and to the bes	t of my knowledge and belief it	is true, correct and complete.		
Type or Print Name of Treasurer Floyd Huen					
Signature of Treasurer	Hyll Hu		Date 0/ 28 2016		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109 ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use		For further information c Federal Election Commissi	EEL. ELIBIO I		

		III I (Neviseu 02/2005)			
TYPE OF COMMITTEE					
Candidate Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name Candid					
Candid Party /		Office State Senate President District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Candid					
Party	Con	nmittee:			
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.			
Politi	cal A	ction Committee (PAC):			
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a			
		Corporation Corporation w/o Capital Stock Labor Organization			
		Membership Organization Trade Association Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint	Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
	Committees Participating in Joint Fundraiser				
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number C			
٠	4.				

٧	Wells tone	Democratic Kenewal Club-PAC
6 .	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
W	16 L L S TONE 0	GMOCRATIC REMOWAL CLUB
L		
	Mailing Address	PO BOX 65
	·	BERKELEY
		CITY STATE ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
7 .	Custodian of Records: Identification books and records.	ntify by name, address (phone number optional) and position of the person in possession of committee
	Full Name FILION	(D, H,V,E,N, , , , , , , , , , , , , , , , , ,
	Mailing Address	2181 BRAGMAR RD
		0,AK,L,AN,D CA 9,4,6,0,2 -
	Title or Position	CITY STATE ZIP CODE
	TREASURER	Telephone number 5,10-5,9,3-7,9,6
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
	Full Name of Treasurer	[D
	Mailing Address	2,1,8,1, 18,R,A,G,M,A,B, 1,R,D,
		CITY STATE ZIP CODE
	Title or Position	SIAIE ZIF CODE

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Jack Kurzweii 1737 Allston Way Berkeley, CA 94703-1753

deral [lection Commission

999 Go Street, HW Washington, D.C. 20463



FEC Form #1

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
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Other (Specify):	Date of Receipt or Postmarked			
PREPARER (3/2015)	2/18/16 DATE PREPARED			